• ;

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application of Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) FEE NUMBER EXTRA RATE RATE NUMBER FILED FOR BASIC FEE s_300 OŔ (37 CFR 1.16(a)) TOTAL CLAIMS x s 50 = x s<u>.25</u> = OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS x s 100 =OR minus 3 = (37_CFR 1.16(b)) MULTIPLE DEPENDENTICUAIM PRESENT (197 OFR 1 16(8)) OR TOTAL TOTAL * If the difference in column 1 is less than zero, enter *0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY (Column 2) (Column 3) SMALL ENTITY (Column 1) HIGHEST CLAIMS PRESENT ADDI-RATE RATE ADDI-NUMBER REMAINING TIONAL **EXTRA** TIONAL **PREVIOUSLY** AFTER AMENDMENT FEE FEE PAID FOR **AMENDMENT** Minus Total x s<u>25</u> = x s <u>50</u> = OR (37 CFR 1,16(ci) Minus Independent x s 200 = x s 100 =OR (37 CFR 1.15(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +s 180 = + 5 360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS **PRESENT** ADDI-RATE RATE ADDI-NUMBER REMAINING TIONAL -**EXTRA** TIONAL PREVIOUSLY **AFTER** AMENDMENT FEE FEE PAID FOR **AMENDMENT** Minus x s<u>50</u> = Total x s 25 = OR (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) Minus x s<u>200</u>= x s 00 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + 5 | 80 = OR TOTAL IUIAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ADDI-**PRESENT** ADDI-RATE NUMBER . REMAINING TIONAL **EXTRA** TIONAL **PREVIOUSLY** AMENDMENT **AFTER** FEE FEE PAID FOR **AMENDMENT** Minus x s **50** = x s 25 = Total OR (37 CFR 1,16(c)) Minus Independent x s 100 =x s 200 = OR (37 CFR 1.16(b)) + s 180 = + s 360 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L F.EE OR ADD'L FEE . If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 114 To 12 رينيخ الثانية الم any pairent 10.11.37 " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradeniark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

"If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

4 CALL 4. 1 1.20 May 1

PATENT APPLICATION FEE DETERMINATION RECORD [0] 10 1 2 15												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			772		COMMITTEE			RATE	FEE	OR 1	RATE	FEE
			NUMBER FILED		NUMBER EXTRA			BASIC FEE			BASIC FEE	
FOR					NUMBER EXTRA				575.00	OH		750.00
TOTAL CHARGEABLE CLAIMS			* / / minus 20=		• 5			X\$ 9= '	471	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = 4					X42= ·	84	OR	X84=	•
ML	JLTIPLE DEPEN	IDENT CLAIM P	RESENT	_				+140=		OR	+280=	
*If the difference in column 1 is less than zero, enter "0" in column 2									026	OR	TOTAL	
CLAIMS AS AMENDED - PART II OTHER THAN												
11	20.0P.	(Column 1)		(Colur		(Column 3)	1	SHIMLE	ADDI-		Swine .	
ENTA		REMAINING AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL : FEE .
OME	Total	. 83	Minus	* 7	3	= 10		X\$ 9=	90.00	OR	X\$18=	
AMEND	Independent	• 5	Minus	*** (5	2		X42=	, , , ,	OR	V04	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDENT	CLAIM		1					
:	•							+140=		OR	+280=	:
8	2-20-09	(Column 1) CLAIMS REMAINING AFTER		(Cotum HIGH NUMI PREVIO	EST BER	(Column 3) PRESENT		ADDIT. FEE	ADDI- TIONAL	OR	ADDIT, FEE	ADDI- TIONAL
AMENDMENT	700	AMENDMENT	V	PAID		11	۱		FEE		X\$ 18-	FEE
END	Total Independent	94	Minus :			= 4	11	X\$- 0 ≠		OR		560
AM		NTATION OF MI	<u> </u>	ENDENT	CLAIM	- 7	1	X42=	:	OR	200 204=	800
				-			٠	+140=	* 2002	OR	+280=	
							ı	TOTAL			TOTAL ADDIT. FEE	1350
-	4-11-05	(Column 1)	•	(Colum	nn 21	(Column 3)		ADDIT. FEE I	į		auuii. Pee	
ENTC		: CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDME	Total	. 109	Minus	9	4	- 15	ll	X\$ 9=	FEE	OR	X\$18=	750
ME	Independent	9 10	Minus	*** (j	= /]	X42=			24D	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM]	7765		OR	7604= (200
•	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+280=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
ORI	4 PTO-875 (Rev. 12	(A2) US 00	reminera Printing O	Tion: -2003 —	494-278-000	181;	Pate	nt and frader	an Office, U.	S. DEP	ARTMENT OF	COMMERCE
		1			•		•					